



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
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THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Ejercito	Amy	E.	543-4600
MAILING ADDRESS (Street)			FAX
P. O. Box 2750			543-4882
(City)	(State)	(Zip Code)	
Honolulu, HI 96840-0001			
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

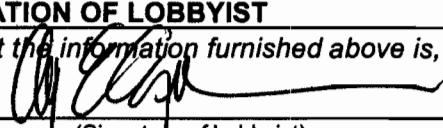
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
Hawaiian Electric Company, Inc.	543-4600	
MAILING ADDRESS (Street)	FAX	
P. O. Box 2750	543-4882	
(City)	(State)	(Zip Code)
Honolulu, HI 96840-0001		
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE	
Marcia Wright	543-5860	
MAILING ADDRESS (Street)	FAX	
P. O. Box 2750	543-7202	
(City)	(State)	(Zip Code)
Honolulu, HI 96840-0001		

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	Education	Human Services	Science, Technology & Economic Development
XX Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
XX Consumer Protection & Commerce	Hawaiian Affairs	XX Labor & Employment	Transportation
Culture, Arts, Historic Preservation	XX Health	Planning, Land & Water Use Management	Other: (indicate below)
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	_____

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

1/10/06

(Date)

PART V AUTHORIZATION TO LOBBY

NAME TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Molly M. Egged

NAME OF ORGANIZATION (if applicable)

Hawaiian Electric Company, Inc.

TELEPHONE

543-7728

MAILING ADDRESS (Street)

P. O. Box 2750

FAX

543-7523

(City)

(State)

(Zip Code)

Honolulu, HI 96840-0001

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

JAN 12 2006

(Date)